Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 1 of 48

| United States Bankruptcy (<br>Northern District of Illinois   |  |                          |                               |   |   |  | Voluntary  | Petition                    |
|---|--|--------------------------|-------------------------------|---|---|--|--|-----------------------------|
| Name of Debtor (if individual, enter Last, First, Middle):  Deans, Alonzo   |  |                          |                               | of Joint De   | ebtor (Spouse)  | ) (Last, First   | , Middle):   |                             |
| All Other Names used by the Debtor in the last 8 (include married, maiden, and trade names):  | 3 years  |                          |                               |   | used by the J<br>maiden, and  |  | in the last 8 years<br>):  |                             |
| Last four digits of Soc. Sec. or Individual-Taxpa (if more than one, state all)   | yer I.D. (ITIN)/Comp                             | olete EIN                |                               | our digits of than one, state                                   |   | Individual-  | Γaxpayer I.D. (ITIN) No  | o./Complete EIN             |
| Street Address of Debtor (No. and Street, City, a 6843 S. Rockwell  | nd State):                                       |                          | Street                        | Address of  | Joint Debtor  | (No. and St  | reet, City, and State):  |                             |
| Apt. 2<br>Chicago, IL   |  | ZIP Code<br><b>60629</b> |                               | 6.0   | 6.1   | D: : 1 D   | CD.  | ZIP Code                    |
| County of Residence or of the Principal Place of <b>Cook</b>  | Business:  |                          | Count                         | y of Reside   | nce or of the   | Principal Pla  | ace of Business:   |                             |
| Mailing Address of Debtor (if different from stre   | eet address):                                    |                          | Mailin                        | g Address   | of Joint Debte  | or (if differe   | nt from street address):   |                             |
|   | Г  | ZIP Code                 |                               |   |   |  |  | ZIP Code                    |
| Location of Principal Assets of Business Debtor (if different from street address above):   |  |                          |                               |   |   |  |  |                             |
| Type of Debtor (Form of Organization) (Check one box)   |  | f Business               |                               |   |   |  | otcy Code Under Whice  | h                           |
| Individual (includes Joint Debtors)  See Exhibit D on page 2 of this form.  □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.)  □ Health Care Business □ Single Asset Real Estate as do in 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Commodity Broker □ Clearing Bank □ Other |  |                          | efined                        | ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt ☐ Chapt                         | er 7<br>er 9<br>er 11<br>er 12  | ☐ Cl<br>of<br>☐ Cl<br>of                               | hapter 15 Petition for Ro<br>a Foreign Main Procee<br>hapter 15 Petition for Ro<br>a Foreign Nonmain Pro | ding<br>ecognition          |
| Chapter 15 Debtors  Country of debtor's center of main interests:  Each country in which a foreign proceeding by, regarding, or against debtor is pending:  Tax-Exempt Entity (Check box, if applicable)  □ Debtor is a tax-exempt organizati under Title 26 of the United State Code (the Internal Revenue Code)   |  |                          | s                             | defined   | are primarily co<br>l in 11 U.S.C. §<br>ed by an indivi-<br>nal, family, or l               | (Checl<br>nsumer debts,<br>101(8) as<br>dual primarily | k one box)  Debts busine   | are primarily<br>ess debts. |
| ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must ☐ A I  |  |                          |                               | a small busing regate nonco \$2,490,925 (colors); ag filed with | debtor as defin<br>ness debtor as d<br>ntingent liquida<br>amount subject<br>this petition. | defined in 11 United debts (exc<br>to adjustment       |  | e years thereafter).        |
| Statistical/Administrative Information  |  |                          |                               | with 11 U.S   | S.C. § 1126(b).   | THIS   | SPACE IS FOR COURT   | USE ONLY                    |
| ☐ Debtor estimates that funds will be available☐ Debtor estimates that, after any exempt propthere will be no funds available for distributi  | erty is excluded and a                           | administrative           |                               | es paid,  |   |  |  |                             |
| 1- 50- 100- 200-  | 1,000- 5,001-<br>5,000 10,000                    |                          | 5,001-<br>0,000               | 50,001-<br>100,000  | OVER 100,000  |  |  |                             |
| \$0 to \$50,001 to \$100,001 to \$500,001 \$50,000 \$100,000 \$500,000 to \$1   | \$1,000,001 \$10,000,001 to \$10 to \$50 million | to \$100 to              | 00,000,001<br>\$500<br>illion | \$500,000,001 to \$1 billion                                    |   |  |  |                             |
| \$0 to \$50,001 to \$100,001 to \$500,001   | \$1,000,001 \$10,000,001 to \$50                 |                          | 00,000,001<br>\$500           | \$500,000,001 to \$1 billion                                    |   |  |  |                             |

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main

Document Page 2 of 48

**B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Deans, Alonzo (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Case Number: Date Filed: Where Filed: - None -Location Case Number: Date Filed: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I (To be completed if debtor is required to file periodic reports (e.g., have informed the petitioner that [he or she] may proceed under chapter 7, 11, forms 10K and 10Q) with the Securities and Exchange Commission 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition.  $\mathbf{X}$  /s/ Alexander P. Nohr February 10, 2015 Signature of Attorney for Debtor(s) (Date) Alexander P. Nohr 6309791 Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. П Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

**B1** (Official Form 1)(04/13)

Name of Debtor(s):

Deans, Alonzo

#### **Voluntary Petition**

(This page must be completed and filed in every case)

#### Signatures

#### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Alonzo Deans

Signature of Debtor Alonzo Deans

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

February 10, 2015

Date

#### Signature of Attorney\*

#### X /s/ Alexander P. Nohr

Signature of Attorney for Debtor(s)

#### Alexander P. Nohr 6309791

Printed Name of Attorney for Debtor(s)

#### Robert J. Semrad & Associates, LLC

Firm Name

20 S. Clark Street 28th Floor Chicago, IL 60603

Address

### Email: rsemrad@robertjsemrad.com (312) 913 0625 Fax: (312) 913 0631

Telephone Number

#### February 10, 2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

#### Signature of a Foreign Representative

Page 3

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

#### **Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| v |  |  |  |
|---|--|--|--|
|   |  |  |  |
|   |  |  |  |
|   |  |  |  |

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 4 of 48

B 1D (Official Form 1, Exhibit D) (12/09)

### **United States Bankruptcy Court Northern District of Illinois**

| In re | Alonzo Deans |           | Case No. |    |
|-------|--------------|-----------|----------|----|
|       |              | Debtor(s) | Chapter  | 13 |
|       |              |           |          |    |

### EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- ☐ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.] \_\_\_\_

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

## Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 5 of 48

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont.   | Page 2  |  |  |  |  |
|---|---|--|--|--|--|
|   | 109(h)(4) as impaired by reason of mental illness or lizing and making rational decisions with respect to |  |  |  |  |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone through the Internet.); |   |  |  |  |  |
| ☐ Active military duty in a military combat zone.   |   |  |  |  |  |
| ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.   |   |  |  |  |  |
| I certify under penalty of perjury that the information provided above is true and correct.   |   |  |  |  |  |
| Signature of Debtor: /s/ Alonzo Deans   |   |  |  |  |  |
|   | Alonzo Deans  |  |  |  |  |
| Date: February 10, 201  | 15  |  |  |  |  |

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 6 of 48

B6 Summary (Official Form 6 - Summary) (12/14)

### **United States Bankruptcy Court Northern District of Illinois**

| In re | Alonzo Deans |        | Case No. |    |  |
|-------|--------------|--------|----------|----|--|
| _     |              | Debtor |          |    |  |
|       |              |        | Chapter  | 13 |  |

#### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 1                | 0.00              |             |          |
| B - Personal Property   | Yes                  | 3                | 800.00            |             |          |
| C - Property Claimed as Exempt  | Yes                  | 1                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 1                |                   | 0.00        |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 1                |                   | 0.00        |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 3                |                   | 31,373.52   |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 2                |                   |             | 1,398.37 |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 2                |                   |             | 1,248.00 |
| Total Number of Sheets of ALL Schedu  | ıles                 | 16               |                   |             |          |
|   | T                    | otal Assets      | 800.00            |             |          |
|   |                      |                  | Total Liabilities | 31,373.52   |          |

Entered 02/10/15 10:08:17 Desc Main Case 15-04272 Doc 1 Filed 02/10/15 Page 7 of 48 Document

B 6 Summary (Official Form 6 - Summary) (12/14)

#### **United States Bankruptcy Court Northern District of Illinois**

| In re | Alonzo Deans |        | Case No. |    |
|-------|--------------|--------|----------|----|
| _     |              | Debtor |          |    |
|       |              |        | Chapter  | 13 |

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E)  | 0.00   |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 0.00   |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00   |
| Student Loan Obligations (from Schedule F)  | 0.00   |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00   |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00   |
| TOTAL   | 0.00   |

#### State the following:

| Average Income (from Schedule I, Line 12)  | 1,398.37 |
|--|----------|
| Average Expenses (from Schedule J, Line 22)  | 1,248.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 1,565.45 |

#### State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY"     column              |      | 0.00      |
|--|------|-----------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 0.00 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |      | 0.00      |
| 4. Total from Schedule F   |      | 31,373.52 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |      | 31,373.52 |

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 8 of 48

B6A (Official Form 6A) (12/07)

| In re | Alonzo Deans | Case No |
|-------|--------------|---------|
|       |              | Debtor  |

#### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property

Nature of Debtor's Interest in Property Secured Claim or Exemption

Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption

None

Sub-Total > **0.00** (Total of this page)

Total > **0.00** 

(Report also on Summary of Schedules)

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 9 of 48

B6B (Official Form 6B) (12/07)

| In re | Alonzo Deans | Case No |
|-------|--------------|---------|
| -     |              | Debtor  |

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property       | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--|---|--|
| 1.  | Cash on hand  | X                |  |   |  |
| 2.  | Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | X                |  |   |  |
| 3.  | Security deposits with public utilities, telephone companies, landlords, and others.  | X                |  |   |  |
| 4.  | Household goods and furnishings, including audio, video, and computer equipment.  | Misce            | llaneous household goods and furnishings q | -   | 500.00   |
| 5.  | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | X                |  |   |  |
| 6.  | Wearing apparel.  | Used             | clothing and shoes                         | -   | 300.00   |
| 7.  | Furs and jewelry.   | X                |  |   |  |
| 8.  | Firearms and sports, photographic, and other hobby equipment.   | X                |  |   |  |
| 9.  | Interests in insurance policies.<br>Name insurance company of each<br>policy and itemize surrender or<br>refund value of each.  | Х                |  |   |  |
| 10. | Annuities. Itemize and name each issuer.  | X                |  |   |  |
|     |   |                  |  |   |  |
|     |   |                  | (Total                                     | Sub-Tota of this page)                      | al > <b>800.00</b>   |

**2** continuation sheets attached to the Schedule of Personal Property

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 10 of 48

B6B (Official Form 6B) (12/07) - Cont.

| In re | Alonzo Deans | Case No. |
|-------|--------------|----------|
| -     |              | Debtor , |

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | х                |                                      |   |   |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | x                |                                      |   |   |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize.   | X                |                                      |   |   |
| 14. | Interests in partnerships or joint ventures. Itemize.   | X                |                                      |   |   |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments.  | X                |                                      |   |   |
| 16. | Accounts receivable.  | x                |                                      |   |   |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | X                |                                      |   |   |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars.  | X                |                                      |   |   |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.  | X                |                                      |   |   |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.  | X                |                                      |   |   |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | x                |                                      |   |   |
|     |   |                  | (T                                   | Sub-Total of this page)                     | al > <b>0.00</b>  |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 11 of 48

B6B (Official Form 6B) (12/07) - Cont.

| In re | Alonzo Deans | Case No |
|-------|--------------|---------|
|       |              |         |

Debtor

#### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | Х                |                                      |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                |                                      |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | x                |                                      |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | X                |                                      |   |   |
| 26. | Boats, motors, and accessories.   | X                |                                      |   |   |
| 27. | Aircraft and accessories.   | X                |                                      |   |   |
| 28. | Office equipment, furnishings, and supplies.  | x                |                                      |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                |                                      |   |   |
| 30. | Inventory.  | X                |                                      |   |   |
| 31. | Animals.  | X                |                                      |   |   |
| 32. | Crops - growing or harvested. Give particulars.   | X                |                                      |   |   |
| 33. | Farming equipment and implements.   | X                |                                      |   |   |
| 34. | Farm supplies, chemicals, and feed.   | X                |                                      |   |   |
| 35. | Other personal property of any kind not already listed. Itemize.  | X                |                                      |   |   |

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 800.00 |

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 12 of 48

B6C (Official Form 6C) (4/13)

| In re | Alonzo Deans | Case No  |
|-------|--------------|----------|
| -     |              | Debtor , |

| SCHEDULE C - PROPERTY CLAIMED AS EXEMPT  |   |   |   |  |  |  |  |  |  |  |
|--|---|---|---|--|--|--|--|--|--|--|
| Debtor claims the exemptions to which debtor is entitled (Check one box)  ☐ 11 U.S.C. §522(b)(2)  ☐ 11 U.S.C. §522(b)(3) | \$155,675. (Amo                         | ☐ Check if debtor claims a homestead exemption \$155,675. (Amount subject to adjustment on 4/1/16, an with respect to cases commenced on or after |   |  |  |  |  |  |  |  |
| Description of Property  | Specify Law Providing<br>Each Exemption | Value of<br>Claimed<br>Exemption  | Current Value of<br>Property Without<br>Deducting Exemption |  |  |  |  |  |  |  |
| Household Goods and Furnishings Miscellaneous household goods and furnishings q  | 735 ILCS 5/12-1001(b)                   | 500.00  | 500.00  |  |  |  |  |  |  |  |
| Wearing Apparel Used clothing and shoes  | 735 ILCS 5/12-1001(a)                   | 300.00  | 300.00  |  |  |  |  |  |  |  |

Total: **800.00 800.00** 

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 13 of 48

B6D (Official Form 6D) (12/07)

| In re | Alonzo Deans | Case No. |
|-------|--------------|----------|
| _     |              | Debtor , |

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | Hu<br>H<br>W<br>J<br>C | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED,  NATURE OF LIEN, AND  DESCRIPTION AND VALUE  OF PROPERTY  SUBJECT TO LIEN | CONTLXGENT | UNLLQULDATED | D I SPUTED    | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|--|-----------------|------------------------|--|------------|--------------|---------------|--|---------------------------------|
| Account No.  |                 |                        |  | ╹          | T<br>E       |               |  |                                 |
|  |                 |                        |  |            | D            | Ш             |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        | Value \$   |            |              |               |  |                                 |
| Account No.  |                 |                        |  |            |              |               |  |                                 |
|  | 1               |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        | Value \$   |            |              |               |  |                                 |
| Account No.  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        | Value \$   |            |              |               |  |                                 |
| Account No.  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  |                 |                        |  |            |              |               |  |                                 |
|  | L               | L                      | Value \$   |            |              |               |  |                                 |
| 0  |                 |                        | S  | ubt        | ota          | .1            |  |                                 |
| continuation sheets attached   |                 |                        | (Total of the  | nis p      | oag          | ge)           |  |                                 |
|  |                 |                        |  |            | ota          | ı             | 2.22   |                                 |
|  |                 |                        | (Report on Summary of Sci  |            |              |               | 0.00   | 0.00                            |
|  |                 |                        | (Report on Summary of Sci  | neu        | uit          | <i>ا (د</i> ر |  |                                 |

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Page 14 of 48 Document

B6E (Official Form 6E) (4/13)

| In re | Alonzo Deans | Case No |
|-------|--------------|---------|
| -     |              | Debtor  |

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to

| priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report total also on the Statistical Summary of Certain Liabilities and Related Data.  |
|---|
| ■ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.   |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)   |
| Domestic support obligations  Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible related of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).  |
| Extensions of credit in an involuntary case  Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).  |
| ■ Wages, salaries, and commissions  Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sa representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| Contributions to employee benefit plans  Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busing whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).  |
| ☐ Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).   |
| ☐ Deposits by individuals  Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).   |
| ☐ Taxes and certain other debts owed to governmental units  Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| Commitments to maintain the capital of an insured depository institution  Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Fede Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).   |
| ☐ Claims for death or personal injury while debtor was intoxicated  Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).  |

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 15 of 48

B6F (Official Form 6F) (12/07)

| In re | Alonzo Deans | Case No. | _ |
|-------|--------------|----------|---|
| -     |              | Debtor , |   |

#### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of

Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| — Check this con it decid has no creation holding unsecure   |          |             | no to report on and beneaute 1.                                   |       |                  |             |    |                 |
|--|----------|-------------|---|-------|------------------|-------------|----|-----------------|
| CREDITOR'S NAME,<br>MAILING ADDRESS<br>INCLUDING ZIP CODE,   |          |             | DATE CLAIM WAS INCURRED AND                                       | CONT. | N<br>L<br>I      | I S P       | 3  |                 |
| AND ACCOUNT NUMBER (See instructions above.)   | CODEBTOR | C<br>J<br>M | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | IG    | I<br>D           | L<br>T<br>E | Ξl | AMOUNT OF CLAIM |
| Account No.  |          |             | Due   | Ť     | A<br>T<br>E<br>D |             |    |                 |
| Com Ed<br>3532 Dale Dr<br>Crete, IL 60417  |          | -           |   |       |                  |             |    |                 |
|  |          |             |   |       |                  |             |    | 900.00          |
| Account No. xxxxxxxx8244   |          |             | Opened 12/01/13   |       |                  |             |    |                 |
| Dependon Collection Se<br>Attn: Bankruptcy<br>Po Box 4833  |          | _           | Collection Attorney Emergency Room Care Providers                 |       |                  |             |    |                 |
| Oak Brook, IL 60523  |          |             |   |       |                  |             |    | 309.00          |
| Account No.  |          |             | Notice Only   |       |                  |             |    |                 |
| District Court of Marylard<br>501 E. Fayette St.<br>Baltimore, MD 21202                            |          | -           |   |       |                  |             |    |                 |
|  |          |             |   |       |                  |             |    | 0.00            |
| Account No. xxxx4166   |          |             | Opened 3/01/14 Collection Attorney People Gas Light And           |       |                  |             |    |                 |
| Enhanced Recovery Corp<br>Attention: Client Services<br>8014 Bayberry Rd<br>Jacksonville, FL 32256 |          | -           | Coke Comp   |       |                  |             |    |                 |
| - Control of L OLLOO   |          |             |   |       |                  |             |    | 1,479.00        |
| <b>2</b> continuation sheets attached  |          |             | (Total of t   | Subt  |                  |             | )  | 2,688.00        |

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 16 of 48

B6F (Official Form 6F) (12/07) - Cont.

| In re | Alonzo Deans |        | Case No. |  |
|-------|--------------|--------|----------|--|
| _     |              | Debtor | ,        |  |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME,   | C        | Hu          | sband, Wife, Joint, or Community  |                 | 1                                     | U           | D                               |                 |
|--|----------|-------------|---|-----------------|---------------------------------------|-------------|---------------------------------|-----------------|
| MAILING ADDRESS<br>INCLUDING ZIP CODE,<br>AND ACCOUNT NUMBER<br>(See instructions above.)          | CODEBTOR | C<br>A<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | O N T I N G E N |                                       | NLIQUIDATED | I<br>S<br>P<br>U<br>T<br>E<br>D | AMOUNT OF CLAIM |
| Account No. xxxx7789   |          |             | Opened 12/01/13   | Т               | ֓֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓ | T           |                                 |                 |
| Enhanced Recovery Corp<br>Attention: Client Services<br>8014 Bayberry Rd<br>Jacksonville, FL 32256 |          | -           | Collection Attorney At T  |                 |                                       | D           |                                 | 359.00          |
| Account No.  |          |             | Due   |                 | $\dagger$                             | 1           | 7                               |                 |
| Holy Cross Hospital<br>P.O. Box 2166<br>Bedford Park, IL 60499                                     |          | -           |   |                 |                                       |             |                                 | 2 222 22        |
| Account No.  | _        |             | Notice Only   | 4               | +                                     | 4           | 4                               | 2,000.00        |
| HSBC<br>PO Box 1809<br>Jacksonville, FL 32229  |          | -           |   |                 |                                       |             |                                 | 0.00            |
| Account No.  |          |             | Overpayment of benefits   | +               | $\dagger$                             | 1           | +                               |                 |
| IL Dept of Employment Security<br>Benefit Repayments<br>PO Box 4385<br>Chicago, IL 60680           |          | -           |   |                 |                                       |             |                                 | 1,300.00        |
| Account No.  |          |             | Notice Only   | +               | $\dagger$                             | +           |                                 | ·               |
| John P. Stabile & Associates<br>6 Saint Paul St, Ste 2201<br>Baltimore, MD 21202                   |          | -           |   |                 |                                       |             |                                 | 0.00            |
| Sheet no. 1 of 2 sheets attached to Schedule of  |          |             | ı   | Sul             | oto                                   | tal         |                                 | 3,659.00        |
| Creditors Holding Unsecured Nonpriority Claims   |          |             | (Total  | of this         | s pa                                  | age         | )                               | 3,039.00        |

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 17 of 48

B6F (Official Form 6F) (12/07) - Cont.

| In re | Alonzo Deans | Case No |
|-------|--------------|---------|
| •     |              | Debtor  |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

|  |                 |             |   |            |           | _        |                 |
|--|-----------------|-------------|---|------------|-----------|----------|-----------------|
| CREDITOR'S NAME,   | C               | Hu          | sband, Wife, Joint, or Community  | ļç         | U         | P        |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | C O D E B T O R | C<br>J<br>M | DATE CLAIM WAS INCURRED AND<br>CONSIDERATION FOR CLAIM. IF CLAIM<br>IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | RLIQUIDAT | DISPUTED | AMOUNT OF CLAIM |
| Account No.  | 1               |             |   | '          | Ę         |          |                 |
| JUDGMENT   |                 | -           |   |            | D         |          |                 |
|  |                 |             |   |            |           |          | 13,000.00       |
| Account No.  Maryland Auto Insurance Fund  |                 |             | Judgment for Case No.<br>0101-0014940-1997  |            |           |          |                 |
| P.O. Box 2071<br>Annapolis, MD 21404   |                 | -           |   |            |           |          |                 |
|  |                 |             |   |            |           |          | 11,659.52       |
| Account No.  | 1               |             | Notice Only   |            |           |          |                 |
| peoples gas<br>130 E. Randolph Drive<br>Chicago, IL 60601                        |                 | -           |   |            |           |          |                 |
|  |                 |             |   |            |           |          | 0.00            |
| Account No. xxx8897  | +               |             | Opened 4/01/13 Collection Attorney Dish Network   |            |           |          |                 |
| Stellar Recovery Inc<br>4500 Salisbury Rd Ste 10                                 |                 | -           | ,   |            |           |          |                 |
| Jacksonville, FL 32216   |                 |             |   |            |           |          | 367.00          |
| Account No.  |                 |             |   |            |           | T        |                 |
|  |                 |             |   |            |           |          |                 |
|  |                 |             |   |            |           |          |                 |
|  |                 |             |   |            |           |          |                 |
|  |                 |             |   |            |           |          |                 |
| Sheet no. <b>2</b> of <b>2</b> sheets attached to Schedule of                    |                 |             |   | Sub        | tota      | ı<br>ıl  |                 |
| Creditors Holding Unsecured Nonpriority Claims                                   |                 |             | (Total of t   |            |           |          | 25,026.52       |
|  |                 |             |   | 7          | Γota      | al       |                 |
|  |                 |             | (Report on Summary of So  | chec       | dule      | es)      | 31,373.52       |

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 18 of 48

B6G (Official Form 6G) (12/07)

| In re | Alonzo Deans | Case No. |
|-------|--------------|----------|
| _     |              |          |

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Antwon Nash 6843 S. Rockwell Chicago, IL 60629 Written lease for \$750.00

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 19 of 48

B6H (Official Form 6H) (12/07)

| In re | Alonzo Deans | Case No. |
|-------|--------------|----------|
|       |              | , Debtor |

#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 20 of 48

| Fill i           | n this information to identify your c   | 250.                       |   |           |      | 1       |                                   |   |                         |         |
|------------------|---|----------------------------|---|-----------|------|---------|-----------------------------------|---|-------------------------|---------|
|                  | tor 1 Alonzo Dear   |                            |   |           |      |         |                                   |   |                         |         |
|                  | tor 2   |                            |   |           | _    |         |                                   |   |                         |         |
| Unit             | ed States Bankruptcy Court for the  | : NORTHERN DISTRIC         | CT OF ILLINOIS                                      |           |      |         |                                   |   |                         |         |
| Of<br>Sc<br>Be a | ficial Form B 6I  hedule I: Your Inc  | sible. If two married peo  |   |           |      | ☐ / 1   | 3 income  MM / DD/ Y  otor 2), bo | ed filing<br>ent showin<br>as of the fo<br>YYYY |                         | 12/1    |
| spoi             | se. If you are separated and you has a separate sheet to this form.  Describe Employment  | ır spouse is not filing wi | ith you, do not includ                              | le infori | mati | on abou | t your spo                        | ouse. If me                                     | ore space is            | needed, |
| 1.               | Fill in your employment information.  |                            | Debtor 1  |           |      |         | Debtor 2                          | 2 or non-fi                                     | iling spouse            |         |
|                  | If you have more than one job, attach a separate page with information about additional   | Employment status          | <ul><li>■ Employed</li><li>□ Not employed</li></ul> |           |      |         | ☐ Empl                            | -   |                         |         |
|                  | employers.  | Occupation                 | Packer  |           |      |         | -                                 |   |                         |         |
|                  | Include part-time, seasonal, or self-employed work.   | Employer's name            | Crown Temp Se                                       | rvice     |      |         |                                   |   |                         |         |
|                  | Occupation may include student or homemaker, if it applies.   | Employer's address         | 5417 W. 79th St.<br>Burbank, IL 604                 | 59        |      |         |                                   |   |                         |         |
|                  |   | How long employed t        | here? 9 month                                       | ıs        |      |         | _                                 |   |                         |         |
| Part             | 2: Give Details About Mor   | nthly Income               |   |           |      |         |                                   |   |                         |         |
| spou<br>If you   | nate monthly income as of the d<br>se unless you are separated.<br>I or your non-filing spouse have me<br>space, attach a separate sheet to | ore than one employer, co  | ,   |           |      |         |                                   | •   | ·                       | J       |
|                  | opacc, andorra coparate cricer to   |                            |   |           |      | For De  | btor 1                            |   | btor 2 or<br>ing spouse |         |
| 2.               | List monthly gross wages, sala deductions). If not paid monthly,  |                            |   | 2.        | \$   | 1       | ,646.67                           | \$  | N/A                     |         |
| 3.               | Estimate and list monthly overt   | ime pay.                   |   | 3.        | +\$  |         | 0.00                              | +\$   | N/A                     |         |
| 4.               | Calculate gross Income. Add lin   | ne 2 + line 3.             |   | 4.        | \$   | 1,6     | 46.67                             | \$  | N/A                     |         |

## Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 21 of 48

| 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for testives. 5c. Voluntary contributions for the form fund form for form fund form form form fund form form form form form form form form  | Deb | tor 1                       | Alonzo Deans   | -      | Case            | number (if known) |               |                         |
|--|-----|-----------------------------|--|--------|-----------------|-------------------|---------------|-------------------------|
| 5. List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. Voluntary contributions for velocity for the following for the following foll  |     |                             |  |        |                 |                   | non-f         |                         |
| 5a. Tax, Medicare, and Social Security deductions 5b. Mandatory contributions for retirement plans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for retirement fund loans 5c. Voluntary contributions for the Viviance Sec. Voluntary Color V  |     | Cop                         | by line 4 here   | 4.     | \$ <u></u>      | 1,646.67          | \$ <u></u>    | N/A                     |
| 55.   Mandatory contributions for retirement plans   55.   \$ 0.00   \$ NI/A   | 5.  | List                        | t all payroll deductions:  |        |                 |                   |               |                         |
| 5c. Voluntary contributions for retirement plans 5d. Required repayments of retirement fund loans 5d. S. 0.00 \$ N/A 5d. NA 5d. Required repayments of retirement fund loans 5d. \$ 0.00 \$ N/A 5d. Domestic support obligations 5f. \$ 0.00 \$ N/A 5d. Other deductions. Specify: 5d. NA 5d. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 \$ N/A 6d. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 \$ N/A 6d. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm 6d All other income regularly receive line defensions and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive linclude allmony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8d. Social Security 8e. \$ 0.00 \$ N/A 8e. Social Security 8f. Other government assistance that you regularly receive linclude cash assistance and the volue (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 9h. Add all other income. Add lines 8a+8b+8c+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Specify: 9h. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Positive Add the amount of line 10 to the amount in line 11. The result is the combined monthly income. Positive Add the amount of line 10 to the amount in line 11. The result is the combined mo   |     | 5a.                         | Tax, Medicare, and Social Security deductions  | 5a.    | \$              | 154.14            | \$            | N/A                     |
| 5-6. Insurance 5-6. Insurance 5-7. Domestic support obligations 5-8. Insurance 5-8. S 34.16 S N/A 5-9. Union dues 5-9. Union due   |     | 5b.                         | Mandatory contributions for retirement plans   | 5b.    | \$              | 0.00              | \$            | N/A                     |
| 5e. Insurance  5f. Domestic support obligations  5f. Domestic support obligations  5f. Domestic support obligations  5g. Union dues  5g. S. 0.000 \$ N/A  5h. Other deductions. Specify:  5h. \$ 0.000 \$ N/A  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,398.37 \$ N/A  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Altach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly in tincome.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. S. 0.00 \$ N/A  8e. \$ 0.00 \$ N/A  8f. Other government assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8d. Other government compensation  8d. \$ 0.00 \$ N/A  8d. Other government assistance that you regularly receive Include cash assistance program) or housing subsidies.  Specify:  8d. \$ 0.00 \$ N/A  8d. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  8d. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add all other regular contributions to the expenses that you ist in Schedule J. Include contributions from an unmarried pattern, remelses of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabiliti  |     |                             | · · · · · · · · · · · · · · · · · · ·  |        |                 | 0.00              | \$            | N/A                     |
| 5f. Domestic support obligations 5g. Union dues 5g. Union dues 5h. Other deductions. Specify: 5h. + \$ 0.00 5h. N/A 5h. Other deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 5h. N/A 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 5h. N/A 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,398.37 5h. N/A 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$ 0.00 5h. N/A 8d. Unemployment compensation 8d. \$ 0.00 5h. N/A 8e. Social Security 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8pecify: 8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. ± \$ 0.00 5h. N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 5h. N/A 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain   |     |                             |  |        | · · —           |                   | \$            |                         |
| 5g. Union dues  5g. Vinion dues  5g. \$ 0.00  \$ N/A  5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  6. \$ 248.30  \$ N/A  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 1,398.37  \$ N/A  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross  receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive lockude alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00  \$ N/A  8d. \$ 0.00  \$ N/A  8d. Unemployment compensation  8d. \$ 0.00  \$ N/A  8d. Unemployment assistance that you regularly receive Include cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00  \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00  \$ N/A  10. Calculate monthly income. Add lines 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-  |     |                             |  |        | · · · —         |                   | \$            |                         |
| 5h. Other deductions. Specify:  6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  6. \$ 248,30 \$ N/A  7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  7. \$ 1,398.37 \$ N/A  8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (herefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. \$ 0.00 \$ N/A  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. \$ 0.00 \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarrised partner, members of your household, your dependents, your roommates, and other friends or relatives.  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Sta  |     |                             |  |        | · -             |                   | \$ <u> </u>   |                         |
| 6. Add the payroll deductions. Add lines 5a+5b+5c+5c+5d+5e+5f+5g+5h. 6. \$ 248.30 \$ N/A  7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,398.37 \$ N/A  8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation 8e. \$ 0.00 \$ N/A  8e. \$ 0.00 \$ N/A  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  8g. Pension or retirement income 8g. \$ 0.00 \$ N/A  8h. \$ 0.00 \$ N/A  9g. Pension or retirement income 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  9h. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  11. +\$ 0.  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  |     | -                           |  | -      | · · · —         |                   | _ \$ <u> </u> |                         |
| <ul> <li>7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 1,398.37 \$ N/A</li> <li>8. List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm. Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.</li> <li>8b. Interest and dividends</li> <li>8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.</li> <li>8d. Unemployment compensation</li> <li>8d. \$ 0.00 \$ N/A</li> <li>8e. Social Security</li> <li>8f. 0.00 \$ N/A</li> <li>8f. 0.00 \$ N/A</li> <li>8f. 0.00 \$ N/A</li> <li>8g. Pension or retirement income</li> <li>8g. \$ 0.00 \$ N/A</li> <li>8g. \$ 0.00 \$ N/A</li> <li>8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.</li> <li>9. \$ 0.00 \$ N/A</li> <li>9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.</li> <li>9. \$ 0.00 \$ N/A</li> <li>10. Calculate monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.</li> <li>9. \$ 0.00 \$ N/A</li> <li>11. +\$ 0</li> <li>21. 4Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.</li> <li>12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies</li> <li>10. Do you expect an increase or decrease within the year after you file this form?</li> <li>10. Do you expect an increase or decrease within the year after you file this form?</li> </ul>   | _   |                             |  | _      | ` <b>_</b> _    |                   | · :—          |                         |
| 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8b. Interest and dividends 8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8d. Unemployment compensation 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: 8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  2 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.   |     |                             |  |        | <sup>\$</sup> — |                   | ·—            |                         |
| 8a. Not income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  8b. Interest and dividends  8c. Family support payments that you, a non-filling spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ N/A  8e. \$ 0.00 \$ N/A  8e. \$ 0.00 \$ N/A  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8f. \$ 0.00 \$ N/A  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9 \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0  22. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.  | 7.  | Cal                         | culate total monthly take-home pay. Subtract line 6 from line 4.   | 7.     | \$              | 1,398.37          | \$            | <u>N/A</u>              |
| 8b. Interest and dividends 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8c. \$ 0.00 \$ N/A 8d. Unemployment compensation 8d. \$ 0.00 \$ N/A 8e. Social Security 8e. \$ 0.00 \$ N/A 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8g. \$ 0.00 \$ N/A 8h. Other monthly income. Specify:  8h. + \$ 0.00 \$ N/A 8h. Other monthly income. Add line 8 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. + \$ 0  2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.  | 8.  |                             | Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total   | 82     | ¢               | 0.00              | ¢             | N/A                     |
| 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance at the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.  |     | 8h                          | •  |        | · <del>-</del>  |                   | ф <u>—</u>    |                         |
| regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8e. Social Security  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8f. \$ 0.00 \$ N/A  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8h. + \$ 0.00 \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0  Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.   |     |                             |  |        | Ψ               | 0.00              | Ψ             | <u>IV/A</u>             |
| 8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. + \$ 0.00 \$ N/A 8h. + \$ 0.00 \$ N/ |     |                             | regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.    | · · · —         |                   | · —           |                         |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income 8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  No.  |     |                             |  |        | · · · —         |                   | · ·           |                         |
| Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income.  No.  |     |                             | •  | e.     | Φ               | 0.00              | » <u>—</u>    | N/A                     |
| 8h. Other monthly income. Specify:  8h. + \$ 0.00 + \$ N/A  9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 0.00   \$ N/A  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 1,398  Combined monthly income.  No.   |     | Oi.                         | Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.   |        | \$              | 0.00              | \$            | N/A                     |
| 9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$ 0.00 \$ N/A  10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.   |     | 8g.                         |  | 8g.    | \$              |                   | \$            | N/A                     |
| 10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J.  Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.  Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly income.  No.  |     | 8h.                         | Other monthly income. Specify:   | 8h.+   | · \$            | 0.00              | + \$          | <u>N/A</u>              |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.  | 9.  | Add                         | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.   | 9.     | \$              | 0.00              | \$            | N/A                     |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  13. Do you expect an increase or decrease within the year after you file this form?  No.  | 10  | Cal                         | culate monthly income. Add line 7 + line 9   | 10 \$  |                 | 1 209 27 + \$     |               | N/A - \$ 1 308 3        |
| <ul> <li>State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0</li> <li>12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Combined monthly incomentally in</li></ul>  | 10. |                             | •  | 10.  Ψ |                 | Ψ_                |               | Ψ 1,390.31              |
| Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$\frac{1,398}{\text{Combined}}\$  13. Do you expect an increase or decrease within the year after you file this form?  No.  | 11. | Star<br>Incli<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a | depen  |                 | •                 |               |                         |
| 13. Do you expect an increase or decrease within the year after you file this form?  No.   | 12. | Writ                        | te that amount on the Summary of Schedules and Statistical Summary of Certai   |        |                 |                   |               |                         |
| ■ No   | 13. | Do                          | you expect an increase or decrease within the year after you file this form  | ?      |                 |                   |               | Combined monthly income |
|  |     |                             | • •  |        |                 |                   |               |                         |

Official Form B 6I Schedule I: Your Income page 2

### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 22 of 48

| Fill in this     | s information to identify   | your case:                    |   |                       |            |                    |                               |
|------------------|---|-------------------------------|---|-----------------------|------------|--------------------|-------------------------------|
| Debtor 1         | Alonzo Dea  | ıns                           |   |                       | Ch         | eck if this is:    |                               |
|                  | <u> </u>  |                               |   |                       |            | An amended filing  |                               |
| Debtor 2         | f (:::)   |                               |   |                       |            |                    | wing post-petition chapter    |
| (Spouse, i       | f filing)   |                               |   |                       |            | 13 expenses as of  | the following date:           |
| United Sta       | ates Bankruptcy Court for the   | ne: NORTH                     | ERN DISTRICT OF ILLING  | OIS                   |            | MM / DD / YYYY     |                               |
| Case num         | ber   |                               |   |                       |            |                    | r Debtor 2 because Debto      |
| (If known)       |   |                               |   |                       |            | 2 maintains a sepa | arate household               |
| Offici           | al Form B 6J  |                               |   |                       |            |                    |                               |
| Sche             | dule J: Your  | Expen                         | ses   |                       |            |                    | 12/1:                         |
| Be as co         | mplete and accurate   | as possible.<br>needed, attac | If two married people are   |                       |            |                    |                               |
| Part 1: 1. Is ti | Describe Your House is a joint case?                                    | sehold                        |   |                       |            |                    |                               |
|                  | -   |                               |   |                       |            |                    |                               |
| _                | No. Go to line 2.<br>Yes. <b>Does Debtor 2 liv</b> e                    | in a conara                   | ete household?  |                       |            |                    |                               |
| Ц                |   | ili a sepaia                  | ate nousenoid:  |                       |            |                    |                               |
|                  | ☐ No<br>☐ Yes. Debtor 2 m   | ust file a sep                | arate Schedule J.   |                       |            |                    |                               |
| 2. <b>Do</b>     | you have dependents   | ? 🗆 No                        |   |                       |            |                    |                               |
|                  | not list Debtor 1 and otor 2.   | Yes.                          | Fill out this information for each dependent                              | Dependent's relati    |            | Dependent's age    | Does dependent live with you? |
|                  | not state the endents' names.   |                               |   | Daughter              |            | 8                  | □ No<br>■ Yes                 |
|                  |   |                               |   | Daughter              |            | 13                 | □ No                          |
|                  |   |                               |   | Daugittei             |            |                    | ■ Yes<br>□ No                 |
|                  |   |                               |   |                       |            |                    | ☐ Yes                         |
|                  |   |                               |   |                       |            |                    | □ No                          |
|                  |   |                               |   |                       |            |                    | ☐ Yes                         |
| ехр              | your expenses include<br>enses of people other<br>rself and your depend | than                          | No<br>Yes   |                       |            |                    |                               |
|                  | s as of a date after the  | your bankru                   | y Expenses<br>iptcy filing date unless y<br>y is filed. If this is a supp |                       |            |                    |                               |
| the value        |   |                               | government assistance it<br>luded it on <i>Schedule I:</i> Y              |                       |            | Your exp           | enses                         |
|                  | rental or home owner<br>ments and any rent for                          |                               | ses for your residence. In  | nclude first mortgage | e<br>4.    | \$                 | 750.00                        |
| , ,              | ot included in line 4:  | <b>J</b>                      |   |                       |            |                    |                               |
|                  |   |                               |   |                       | 40         | ¢                  | 0.00                          |
| 4a.<br>4b.       | Real estate taxes Property, homeowne                                    | r's, or renter'               | s insurance   |                       | 4a.<br>4b. | · : -              | 0.00<br>0.00                  |
| 4c.              | Home maintenance,   |                               |   |                       | 4c.        | •                  | 0.00                          |
| 4d.              | Homeowner's associ  |                               |   |                       | 4d.        |                    | 0.00                          |
| 5. <b>Add</b>    |   |                               | ur residence, such as ho  | me equity loans       | 5.         |                    | 0.00                          |

### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 23 of 48

| Debtor 1 Alonzo    | Deans   | Case numl | ber (if known) |                             |
|--------------------|---|-----------|----------------|-----------------------------|
| . Utilities:       |   |           |                |                             |
|                    | , heat, natural gas   | 6a.       | \$             | 75.00                       |
| •                  | ewer, garbage collection  | 6b.       | \$             | 0.00                        |
|                    | e, cell phone, Internet, satellite, and cable services  | 6c.       | \$             | 0.00                        |
|                    | pecify: Cell Phone (1 line)   | 6d.       | ·              | 60.00                       |
|                    | sekeeping supplies  | 7.        | \$             | 250.00                      |
|                    | children's education costs  | 8.        | \$             | 0.00                        |
|                    | dry, and dry cleaning   | 9.        | \$             |                             |
|                    | products and services   | 10.       | \$             | 15.00                       |
|                    |   | 10.       | \$             | 0.00                        |
| 1. Medical and de  | •   | 11.       | Ψ              | 16.00                       |
| Do not include     | Include gas, maintenance, bus or train fare.      Par payments  | 12.       | \$             | 40.00                       |
|                    | clubs, recreation, newspapers, magazines, and books   | 13.       | \$             | 0.00                        |
|                    | tributions and religious donations  | 14.       | ·              | 0.00                        |
| 5. Insurance.      |   |           |                | 0.00                        |
|                    | nsurance deducted from your pay or included in lines 4 or 20.   |           |                |                             |
| 15a. Life insur    |   | 15a.      | \$             | 0.00                        |
| 15b. Health in     | surance   | 15b.      | \$             | 0.00                        |
| 15c. Vehicle ir    | nsurance  | 15c.      | \$             | 30.00                       |
| 15d. Other ins     | urance. Specify:  | 15d.      | \$             | 0.00                        |
| 6. Taxes. Do not i | nclude taxes deducted from your pay or included in lines 4 or 20.   |           | ·              | <u> </u>                    |
| Specify:           | , , ,   | 16.       | \$             | 0.00                        |
| . Installment or   | lease payments:   |           |                |                             |
| 17a. Car paym      | nents for Vehicle 1   | 17a.      | \$             | 0.00                        |
| 17b. Car paym      | nents for Vehicle 2   | 17b.      | \$             | 0.00                        |
| 17c. Other. Sp     | pecify:   | 17c.      | \$             | 0.00                        |
| 17d. Other. Sp     | pecify:   | 17d.      | \$             | 0.00                        |
| . Your payments    | s of alimony, maintenance, and support that you did not report  | as        | _              | 2.22                        |
|                    | your pay on line 5, Schedule I, Your Income (Official Form 6I).   | 18.       |                | 0.00                        |
| . Other payment    | s you make to support others who do not live with you.  |           | \$             | 0.00                        |
| Specify:           |   | 19.       |                |                             |
|                    | perty expenses not included in lines 4 or 5 of this form or on So   |           |                |                             |
|                    | es on other property  | 20a.      |                | 0.00                        |
| 20b. Real esta     |   | 20b.      | ·              | 0.00                        |
|                    | homeowner's, or renter's insurance  | 20c.      |                | 0.00                        |
|                    | nce, repair, and upkeep expenses  | 20d.      | ·              | 0.00                        |
|                    | ner's association or condominium dues   | 20e.      | \$             | 0.00                        |
| . Other: Specify:  | Personal Grooming   | 21.       | +\$            | 12.00                       |
| Your monthly       | expenses. Add lines 4 through 21.   | 22.       | \$             | 1,248.00                    |
|                    | ur monthly expenses.  |           |                | 1,240.00                    |
|                    | monthly net income.   | l         |                |                             |
|                    | 12 (your combined monthly income) from Schedule I.  | 23a.      | \$             | 1,398.37                    |
|                    | ir monthly expenses from line 22 above.   | 23b.      |                | 1,248.00                    |
| 1,7,7              | , ,   | 1         |                | 1,210100                    |
| 23c. Subtract      | your monthly expenses from your monthly income.   |           |                |                             |
|                    | t is your monthly net income.   | 23c.      | \$             | 150.37                      |
| For example, do y  | an increase or decrease in your expenses within the year after ou expect to finish paying for your car loan within the year or do you expect ye terms of your mortgage? |           |                | se or decrease because of a |
| ☐ Yes.             |   |           |                |                             |
| Explain:           |   |           |                |                             |

Document

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Page 24 of 48

**B6 Declaration (Official Form 6 - Declaration).** (12/07)

#### **United States Bankruptcy Court Northern District of Illinois**

| In re | Alonzo Deans   |             |                                      | Case No.     |      |
|-------|--|-------------|--------------------------------------|--------------|------|
|       |  |             | Debtor(s)                            | Chapter      | 13   |
|       | DECLARATION (  | CONCERN     | ING DEBTOR'S                         | SCHEDUL      | ES   |
|       | DECLARATION UNDER  | R PENALTY ( | OF PERJURY BY INI                    | DIVIDUAL DEI | BTOR |
|       | I declare under penalty of perjury sheets, and that they are true and correct to |             |                                      |              |      |
| Date  | February 10, 2015  | Signature   | /s/ Alonzo Deans Alonzo Deans Debtor |              |      |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 25 of 48

B7 (Official Form 7) (04/13)

#### United States Bankruptcy Court Northern District of Illinois

| In re | Alonzo Deans |           | Case No. | ase No. |  |
|-------|--------------|-----------|----------|---------|--|
|       |              | Debtor(s) | Chapter  | 13      |  |

#### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

#### 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$1,500.00 2015 YTD:Income from Employment \$18,000.00 2014: Income from Employment

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$9,500.00 2013: Unemployment

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 26 of 48

B7 (Official Form 7) (04/13)

2

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF TRANSFERS

AMOUNT STILL OWING

NAME AND ADDRESS OF CREDITOR

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

#### 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION STATUS OR DISPOSITION

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

#### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 27 of 48

B7 (Official Form 7) (04/13)

3

#### 5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

#### 7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

#### 9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Robert J. Semrad & Associates 20 S. Clark Street 28th Floor Chicago, IL 60603 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 02/07/2015

AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY
\$350.00

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 28 of 48

B7 (Official Form 7) (04/13)

1

#### 10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

#### 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

LOCATION OF PROPERTY

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

#### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 29 of 48

B7 (Official Form 7) (04/13)

5

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

-

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF

**ENVIRONMENTAL** 

GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 30 of 48

B7 (Official Form 7) (04/13)

#### 18. Nature, location and name of business

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six **years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

> LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. ADDRESS (ITIN)/ COMPLETE EIN

**BEGINNING AND** 

NATURE OF BUSINESS **ENDING DATES** 

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

NAME **ADDRESS** 

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

#### NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

**ADDRESS** NAME

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

**ADDRESS** NAME

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within two years immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 31 of 48

B7 (Official Form 7) (04/13)

7

#### 20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory,

and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the

commencement of this case.

NAME ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** 

immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

 ${\bf 23}$  . Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the

in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT,

RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement

of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Mair Document Page 32 of 48

B7 (Official Form 7) (04/13)

Q,

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date February 10, 2015

Signature /s/ Alonzo Deans
Alonzo Deans
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 33 of 48

### United States Bankruptcy Court Northern District of Illinois

| In r | e Alonzo Deans   |                                   | Case No.                |                                   |  |
|------|--|-----------------------------------|-------------------------|-----------------------------------|--|
|      |  | Debtor(s)                         | Chapter                 | 13                                |  |
| 1.   | <b>DISCLOSURE OF COMPE</b> Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20   |                                   |                         | . ,                               |  |
| p    | paid to me within one year before the filing of the petiti<br>behalf of the debtor(s) in contemplation of or in connec   | on in bankruptcy, or agreed to be | e paid to me, for serv  |                                   |  |
|      | For legal services, I have agreed to accept  |                                   | <b>\$</b>               | 4,000.00                          |  |
|      | Prior to the filing of this statement I have received  |                                   | \$                      | 350.00                            |  |
|      | Balance Due  |                                   | <u> </u>                | 3,650.00                          |  |
| 2.   | The source of the compensation paid to me was:   |                                   |                         |                                   |  |
|      | ■ Debtor □ Other (specify):  |                                   |                         |                                   |  |
| 3.   | The source of compensation to be paid to me is:  |                                   |                         |                                   |  |
|      | ■ Debtor □ Other (specify):  |                                   |                         |                                   |  |
|      | ■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm  |                                   |                         |                                   |  |
|      | ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached. |                                   |                         |                                   |  |
| 5. I | In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:  |                                   |                         |                                   |  |
|      | <ul><li>a. Analysis of the debtor's financial situation, and rend</li><li>b. Preparation and filing of any petition, schedules, sta</li><li>c. Representation of the debtor at the meeting of credit</li><li>d. [Other provisions as needed]</li></ul> | tement of affairs and plan which  | may be required;        |                                   |  |
| 6.   | By agreement with the debtor(s), the above-disclosed fe  | ee does not include the following | service:                |                                   |  |
|      |  | CERTIFICATION                     |                         |                                   |  |
| this | I certify that the foregoing is a complete statement of ar bankruptcy proceeding.  | ny agreement or arrangement for   | payment to me for re    | epresentation of the debtor(s) in |  |
| Date | ed: <b>February 10, 2015</b>   | /s/ Alexander P. N                | lohr                    |                                   |  |
|      |  | Alexander P. Noh                  |                         |                                   |  |
|      |  | 20 S. Clark Street                | & Associates, LL        | C                                 |  |
|      |  | 28th Floor                        |                         |                                   |  |
|      |  | Chicago, IL 60603                 | 3<br>ax: (312) 913 0631 |                                   |  |
|      |  | rsemrad@robertj                   |                         |                                   |  |

#### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS (Court-Approved Retention Agreement, revised as of March 15, 2011)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure—but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from by their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved the following agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys. By signing this agreement, debtors and their attorneys accept these responsibilities.

#### BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

#### AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly repre-sent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and com-pleteness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

#### ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a fee of

#### \$ 4,000.00 .

Prior to signing this agreement the attorney has received \$\_350.00\_, leaving a balance due of \$\_3,650.00\_. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

- 2. Early termination of the case. Fees payable under the provisions set out above are not refundable in the event that the case is dismissed, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 3. *Retainers*. The attorney may receive a retainer or other payment before filing the case, but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- Any retainer received by the attorney will be treated as an advance payment, allowing the attorney to take the retainer into income immediately. The reason for this treatment is the following:

Client understands that any funds that client is tendering to Robert J. Semrad & Associates, LLC as part of this advance payment retainer shall immediately become the property of Robert J. Semrad & Associates, LLC in exchange for a commitment by Robert J. Semrad & Associates, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by Robert J. Semrad & Associates, LLC and will be used for general expenses of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, Robert J. Semrad & Associates, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. Client further understands that the benefit that client is receiving under this fee arrangement is the commitment of Robert J. Semrad & Associates, LLC to perform any and all work reasonably necessary to represent client's interests absent any extraordinary circumstances.

In any application for fees, whether or not requiring an itemization, the attorney shall disclose to the court any fees paid by the debtor prior to the case filing.

- 4. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 5. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 6. Discharge of the attorney. The debtor may discharge the attorney at any time.

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 38 of 48

| Date: <b>February 10, 2015</b> |                           |  |
|--------------------------------|---------------------------|--|
| Signed:                        |                           |  |
| /s/ Alonzo Deans               | /s/ Alexander P. Nohr     |  |
| Alonzo Deans                   | Alexander P. Nohr 6309791 |  |
|                                | Attorney for Debtor(s)    |  |
| Dahtau(a)                      |                           |  |

Debtor(s)

Do not sign if the fee amount at top of this page is blank.

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

# RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS (Court-Approved Retention Agreement, revised as of March 15, 2011)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure—but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from by their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved the following agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys. By signing this agreement, debtors and their attorneys accept these responsibilities.

#### BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

## THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.

- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

### AFTER THE CASE IS FILED

### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor will also bring to the meeting a social security card.) The debtor must be present in time for check-in and when the case is called for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other

attorney and provide the other attorney with the file in sufficient time to review it and properly repre-sent the debtor.

- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and com-pleteness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Provide any other legal services necessary for the administration of the case.

### ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES

1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a fee of

\$ 4,000.00

Prior to signing this agreement the attorney has received \$\sum\_{350.00}\$, leaving a balance due of \$\sum\_{3,650.00}\$. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

- 2. Early termination of the case. Fees payable under the provisions set out above are not refundable in the event that the case is dismissed, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If a dismissal is due to such a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 3. Retainers. The attorney may receive a retainer or other payment before filing the case, but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- Any retainer received by the attorney will be treated as an advance payment, allowing the attorney to take the retainer into income immediately. The reason for this treatment is the following:

Client understands that any funds that client is tendering to Robert J. Semrad & Associates, LLC as part of this advance payment retainer shall immediately become the property of Robert J. Semrad & Associates, LLC in exchange for a commitment by Robert J. Semrad & Associates, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by Robert J. Semrad & Associates, LLC and will be used for general expenses of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, Robert J. Semrad & Associates, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy case requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while others may be only ministerial in nature. Client further understands that the benefit that client is receiving under this fee arrangement is the commitment of Robert J. Semrad & Associates, LLC to perform any and all work reasonably necessary to represent client's interests absent any extraordinary circumstances.

In any application for fees, whether or not requiring an itemization, the attorney shall disclose to the court any fees paid by the debtor prior to the case filing.

- 4. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 5. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise not engaging in proper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 6. Discharge of the attorney. The debtor may discharge the attorney at any time.

Best Case Bankruptcy

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 43 of 48

Date: February 7, 2015

Signed:

/s/ Alonzo Deans

Alonzo Deans

/s/ Alexander P. Nohr

Alexander P. Nohr 6309791

Attorney for Debtor(s)

Debtor(s)

Do not sign if the fee amount at top of this page is blank.

# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

### Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Document Page 45 of 48

Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

Case 15-04272 Doc 1 Filed 02/10/15 Entered 02/10/15 10:08:17 Desc Main Page 46 of 48 Document

B 201B (Form 201B) (12/09)

# United States Bankruntey Court

|         |  | Northern District of Illinois                               | 11.0              |                               |
|---------|--|---|-------------------|-------------------------------|
| In re   | Alonzo Deans                                   |   | Case No.          |                               |
|         |  | Debtor(s)   | Chapter           | 13                            |
|         |  | OF NOTICE TO CONSUM<br>C(b) OF THE BANKRUPTO                |                   | R(S)                          |
| Code.   | I (We), the debtor(s), affirm that I (we) have | Certification of Debtor e received and read the attached no | tice, as required | by § 342(b) of the Bankruptcy |
| Alonz   | o Deans  | X /s/ Alonzo Dear   | าร                | February 10, 2015             |
| Printed | d Name(s) of Debtor(s)                         | Signature of De   | btor              | Date                          |
| Case N  | No. (if known)                                 | X   |                   |                               |
|         |  | Signature of Joi  | nt Debtor (if an  | y) Date                       |
|         |  |   |                   |                               |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

# **United States Bankruptcy Court**Northern District of Illinois

|       |   | Northern District of Inhiois             |                            |                   |
|-------|---|--|----------------------------|-------------------|
| In re | Alonzo Deans                              |  | Case No.                   |                   |
|       |   | Debtor(s)                                | Chapter 13                 |                   |
|       | VI  | ERIFICATION OF CREDITOR I                | MATRIX                     |                   |
|       |   | Number o                                 | of Creditors:              | 14                |
|       | The above-named Debtor(s (our) knowledge. | s) hereby verifies that the list of cred | litors is true and correct | to the best of my |
|       |   | /s/ Alonzo Deans                         |                            |                   |

Attn: Bankruptcy Po Box 4833 Oak Brook, IL 60523

Dependon Collection Se Maryland Auto Insurance Fund P.O. Box 2071 Annapolis, MD 21404

District Court of Marylard peoples gas 501 E. Fayette St. 130 E. Randolph Dr. Baltimore, MD 21202 Chicago, IL 60601

130 E. Randolph Drive

Enhanced Recovery Corp Stellar Recovery Inc Attention: Client Services 4500 Salisbury Rd Ste 10 8014 Bayberry Rd Jacksonville, FL 32256

Jacksonville, FL 32216

Enhanced Recovery Corp Attention: Client Services 8014 Bayberry Rd Jacksonville, FL 32256

Holy Cross Hospital P.O. Box 2166 Bedford Park, IL 60499

Holy Cross Hospital 2701 W. 68th St. Chicago, IL 60629

**HSBC** PO Box 1809 Jacksonville, FL 32229

IL Dept of Employment Security Benefit Repayments PO Box 4385 Chicago, IL 60680

John P. Stabile & Associates 6 Saint Paul St, Ste 2201 Baltimore, MD 21202